

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS390AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/27/2008
NAME OF PROVIDER OR SUPPLIER ST JOSEPH GROUP CARE 1		STREET ADDRESS, CITY, STATE, ZIP CODE 4309 THYME AVE LAS VEGAS, NV 89104		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	<p>Initial Comments</p> <p>This Statement of Deficiencies was generated as a result of an annual state licensure survey conducted in your facility on June 27, 2008.</p> <p>The survey was conducted using Nevada Administrative Code (NAC) 449, Residential Facility for Groups Regulations, adopted by the Nevada State Board of Health on July 14, 2006.</p> <p>The facility was licensed for 6 total beds.</p> <p>The facility had the following category of classified beds: 6 Category 1 beds.</p> <p>The facility had the following endorsements: Residential facility for the elderly or disabled persons Residential facility for persons with mental illnesses</p> <p>The census at the time of the survey was 6. Six resident files were reviewed and 3 employee files were reviewed. One closed filed was reviewed.</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>The following regulatory deficiencies were identified:</p>	Y 000		
Y 103 SS=D	<p>449.200(1)(d) Personnel File - NAC 441A</p> <p>NAC 449.200 1. Except as otherwise provided in subsection 2,</p>	Y 103		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 103	Continued From page 1 a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee. This Regulation is not met as evidenced by: Based on record review, the facility failed to ensure that requirements for tuberculosis (TB) was not met for 1 of 3 employees. Findings include: The file for employee #1 did not contain evidence of a current surveillance for signs and symptoms of TB. The physician's statement dated June 2007 revealed the 6/08 chest Xray was negative. Severity: 2 Scope: 1	Y 103		
Y 444 SS=D	449.229(9) Smoke Detectors NAC 449.229 9. Smoke detectors must be maintained in proper operating conditions at all times and must be tested monthly. The results of the tests pursuant to this subsection must be recorded and maintained at the facility. This Regulation is not met as evidenced by: Based on observation, the facility failed to maintain 1 of 6 smoke detectors in proper operating condition. Findings include: During a test, the smoke detector located in the	Y 444		

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Y 444	Continued From page 2 "visitor hall" failed to activate. Immediately after the test, the smoke detector began chirping (indicating a need for a new battery). Severity: 2 Scope: 1	Y 444			
Y 451 SS=F	449.231(2)(a) First Aid Kit NAC 449.231 2. A first-aid kit must be available at the facility. The first-aid kit must include, without limitation: (a) A germicide safe for use by humans. This Regulation is not met as evidenced by: Based on observation, the facility failed to maintain a first aid kit with all the required items. Findings include: The first aid kit did not contain a germicide safe for use by humans. Severity: 2 Scope: 3	Y 451			
Y 773 SS=D	449.2726(1)(a)(1) 449.2726(1)(a)(b) Diabetes NAC 449.2726 1. A person who has diabetes must not be admitted to a residential facility or be permitted to remain as a resident of a residential facility unless: (a) The resident's glucose testing is performed by:	Y 773			

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Y 773	Continued From page 3 (1) The resident himself, without assistance; or This Regulation is not met as evidenced by: Based on interview, the facility failed to comply with regulations governing residents who require blood glucose testing. Findings include: Employee #2 explained that Employee #3 had been performing blood glucose testing for Resident #1 every morning. Severity: 2 Scope: 1	Y 773			
Y 877 SS=D	449.2742(5) OTC medications & Dietary Supplements NAC 449.2742 5. An over-the-counter medication or a dietary supplement may be given to a resident only if the resident's physician has approved the administration of the medication or supplement in writing or the facility is ordered to do so by another physician. The over-the-counter medication or dietary supplement must be administered in accordance with the written instructions of the physician. The administration of over-the-counter medication and dietary supplements must be included in the record required pursuant to paragraph (b) of subsection 1 of NAC 449.2744.	Y 877			

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Y 877	Continued From page 4 This Regulation is not met as evidenced by: Based on record review and interview, the facility failed to obtain a physician order for an over the counter medication for 1 of 6 residents. Findings include: Record review The file for Resident #5 did not contain a physician's order for Aspirin. The Medication Administration Record revealed that the resident began receiving Aspirin 81 mg by mouth every day on June 27, 2008. Interview Employee #2 indicated the resident's physician had called the facility and instructed the caregiver to start giving Resident #5 Aspirin 81 mg by mouth every day. Severity: 2 Scope: 1	Y 877			
Y 881 SS=D	449.2742(6)(b) Medication / change order NAC 449.2742 6. Except as otherwise provided in this subsection, a medication prescribed by a physician must be administered as prescribed by the physician. If a physician orders a change in the amount or times medication is to be administered to a resident: (b) Within 5 days after the change is ordered, a copy of the order or prescription signed by the physician must be included in the record maintained pursuant to paragraph (b) of	Y 881			

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Y 881	<p>Continued From page 5</p> <p>subsection 1 of NAC 449.2744.</p> <p>This Regulation is not met as evidenced by: Based on record review and interview, the facility failed to obtain a written order for a change in medication for 1 of 6 residents.</p> <p>Findings include:</p> <p>Record review</p> <p>The file for Resident #2, admitted 3/4/08, contained an order for Rozeram 8 mg. by mouth at every hour of sleep. The medication was not listed on the Medication Administration Record (MAR). There was no Rozeram available.</p> <p>The file for Resident #2 contained an order for Cogentin 1 mg. 1 tab twice a day. The medication was not listed on the MAR. The medication was not available.</p> <p>Interview</p> <p>Employee #2 indicated Resident #2 was seen by a physician in 4/08 and was told to discontinue the Rozeram. No written order was given to Resident #2 for inclusion in her file.</p> <p>Employee #2 indicated Resident #2 was not on Cogentin when admitted on 3/4/08.</p> <p>Severity: 2 Scope: 1</p>	Y 881			
Y 920 SS=F	449.2748(1) Medication Storage	Y 920			

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Y 920	<p>Continued From page 6</p> <p>NAC 449.2748 1. Medication, including, without limitation, any over-the-counter medication, stored at a residential facility must be stored in a locked area that is cool and dry. The caregivers employed by the facility shall ensure that any medication or medical or diagnostic equipment that may be misused or appropriated by a resident or any other unauthorized person is protected. Medication for external use only must be kept in a locked area separate from other medications. A resident who is capable of administering medication to himself without supervision may keep his medication in his room if the medication is kept in a locked container for which the facility has been provided a key.</p> <p>This Regulation is not met as evidenced by: Based on observation and interview, the facility failed to store medications in a locked area.</p> <p>Findings include:</p> <p>Observation</p> <p>At 9:30 AM, a kitchen cabinet containing medications for all 6 residents was unlocked.</p> <p>Interview</p> <p>At 10:30 AM, Employee #2 indicated she had</p>	Y 920			

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Y 920	Continued From page 7 unlocked the cabinet upon surveyor's arrival in anticipation of its inspection. Severity: 2 Scope: 3	Y 920		
YA106 SS=E	449.200(1)(2)(3)Personnel Files NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (a) The name, address, telephone number and social security number of the employee; (b) The date on which the employee began his employment at the residential facility; (c) Records relating to the training received by the employee; (d) The health certificates required pursuant to chapter 441 of NAC for the employee; (e) Evidence that the references supplied by the employee were checked by the residential facility; and (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive. 2. The personnel file for a caregiver of a residential facility must include, in addition to the information required to subsection 1: (a) A certificate stating that the caregiver is currently certified to perform first aid and cardiopulmonary resuscitation; and (b) Proof that the caregiver is 18 years of age or older. 3. The administrator may keep the personnel files for the facility in a locked cabinet and may, except as otherwise provided in this subsection, restrict access to this cabinet by other employees of this facility. Copies of the documents which are evidence that an employee has been certified to perform first aid and cardiopulmonary resuscitation and that the employee has been	YA106		

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YA106	<p>Continued From page 8</p> <p>tested for tuberculosis must be available for review at all times. The administrator shall make the personnel files available for inspection by the Bureau within 72 hours after the Bureau requests to review the files.</p> <p>This Regulation is not met as evidenced by: Based on record review, the facility failed to ensure that employee files contained required documentation for 2 of 3 employees.</p> <p>Findings include:</p> <p>The file for Employee #2, hired as a caregiver on 2/1/06, did not contain:</p> <p>a) evidence that references were checked by the facility; and b) a signed affidavit that the employee had not been convicted of the crimes listed in NSR 449.188.</p> <p>The file for Employee #3, hired as a caregiver on 2/15/91, did not contain a signed statement that the employee had read and understood the regulations governing adult care facilities.</p> <p>Severity: 2 Scope: 2</p>	YA106		

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